

LISBON ALUMNI MEETING

1st – 3rd OCTOBER 2009

REGISTRATON PROGRAM FORM (please fill up one form for each person)

NAME: _____

TAG NAME: _____

ORGANIZATION: _____

PHONE: _____

EMAIL: _____

PROGRAM RATE (PER PERSON) 385,00€

PAYMENT INSTRUCTIONS

- PAYMENT SHOULD BE DONE TILL 10TH SEPTEMBER 2009.
- PAYMENTS RECEIVED BETWEEN 10TH AND 20TH SEPTEMBER WILL HAVE A 10% PENALIZATION OVER THE PROGRAM RATE = 423,50€.
- NO REGISTRATIONS/PAYMENTS WILL BE ACCEPTED AFTER 20TH SEPTEMBER 2009.

MONEY TRANSFER (in Euros) TO THE FOLLOWING ACCOUNT:

IBAN: PT50 0035 0001 00033160930 36

BIC SWIFT: CGDIPTPL

BENEFICIARY: Cristina Paula de Carvalho

IMPORTANT:

- Please make sure that the precise amount will be credit in the mentioned account. The transfer costs instructions must refer **OUR** costs.
- Send the registration form with a copy of your transfer instructions to the following e-mail – geral@dreamabout.pt.
- Only after reception of the money transfer and is confirmation, your registration will be valid. We will e-mail you confirming your registration.



Phone: +351 96 210 34 60/

+351 96 682 17 18

E-mail: geral@dreamabout.pt